FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000080733

1. Corporation Name

QUICKCREATIVE CORP.

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90059 032 ***150.00



										.H ii iii ii ii ii
Principal Place of Business Mailing Address										
1109 N. 13 TERR. 1109 N. 13 TERR.								•		
HOLLYWOOD FL 33019 HOLLYWOOD FL 33019							DO NOT WRITE IN TH	IIS SPACE		
							3. Date Incorporated or Qualifed			
							09/14/1998			
2. Principal Place of Business 2a. Mailing Address							4. FEI Number		Applied For	
21	26						65-0869989	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27							5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	City & State City & State						6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution			
Zip	Country	Zip	Cou	ntry			8. This corporation owes the current year	Intangible		
24	25	29	30	-			Personal Property Tax.	Yes	ŗ	X No
<u></u>	9. Name and Address of Curre			T		1	0. Name and Address of New Registere	ed Agent		
				81	Name					
MCCARTHY, BRIAN K				82	Stropt A	Addroce	Idress (P.O. Box Number is Not Acceptable)			
1109 N. 13 TERR.				62 Street Addr			(F.O. Box Humber is Not recopusity			
HOLLYWOOD FL 33019				83						
				84	City			. 85	Zip Co	ode .
				04	City		F	L "		
SIGNATURE	Signature, typed or printed name of registered at		TE: Registered			equired who	an reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTOF	
12.	D OFFICERS A	DELETE	1.1 TI	пс			75	☐ Cha		Addition
NAME	MCCARTHY, BRIAN K		1.2 N		ł	<i>C</i>	<i>'</i> υ		•	_
STREET ADDRESS	1109 N. 13 TERR.				ADDRESS					
•	HOLLYWOOD FL 33019			TY- 51	- 1					
CITY-ST-ZIP TITLE	D	☐ DELETE	2.1 11		1-21	P/	<u> </u>	Cha	nge	Addition
NAME	LAUGHTON, LISA		2.2 N			<i>F /</i>	U			
STREET ADDRESS	4400 N 40 TEDD				TADDRESS		•	•		
CITY-ST-ZIP	HOLLYWOOD FL 33019		1		ST-ZIP					
TITLE		☐ DELETE	3.1 Ti					Cha	nge	Addition
NAME			3.2 N	AME						
STREET ADDRESS			3.3 S	REET	T ADDRESS					
CITY-ST-ZIP			3.4. 0	ITY-S	ST-ZIP					
TITLE		☐ DELETE	4.1 TI	TLE				☐ Cha	nge	☐ Addition
NAME			4.2 N	AME						
STREET ADDRESS			4 3 S	TREET	ADDRESS		•			
CITY-ST-ZIP			4.4 C	TY-S	T-ZIP					
TITLE		☐ DELETE	5.1 TI	TLE				☐ Cha	nge	☐ Addition
NAME			5.2 N	AME				:		
STREET ADDRESS			5.3 \$	TREE!	TADDRESS			:		
CITY-ST-ZIP				TY-S	r-zip					
TITLE		☐ DELETE	6.1 TI	TLE				Cha	nge	☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP